	IPE		E(S) TRANSMITTA	T					
,	his form, together with		Commiss P.O. Box Alexandr	Mail Stop ISSUE E Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885					
INSTRUCTIONS: This fo appropriate. All further con indicated unless corrected maintenance fee notification	delow of anected otherwise	mitting the ISSUE FEE atent, advance orders and in Block 1, by (a) specify	and PUBLICATION FEE notification of maintenar ring a new correspondence	(if required). Blocks 1 through nce fees will be mailed to the cur e address; and/or (b) indicating a	5 should be completed where rent correspondence address as separate "FEE ADDRESS" for				
24998 7			I hereby cert States Postal addressed to	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name) (Signature)					
APPLICATION NO.	FILING DATE	FIRST NA	AMED INVENTOR	ATTORNEY DOCKET N	O. CONFIRMATION NO.				
10/622,496 TITLE OF INVENTION: S	07/21/2003 YSTEM FOR OPTIMIZING		Ray Beffa ME USING FUSE ID	M4065.0038/P038-D	4998				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION	FEE TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1400	\$300	\$1700	04/13/2006				
EXAM	INER	ART UNIT	CLASS-SUBCLA	SS					
TON, I	DAVID	2138	714-718000						
CFR 1.363). Change of correspond Address form PTO/SB/12 Thee Address indicated PTO/SB/47; Rev 03-02 of Number is required.	ion (or "Fee Address" Indicate or more recent) attached. Use	orrespondence (1) the or age (2) the registe 2 registed,	e names of up to 3 registernts OR, alternatively, e name of a single firm (hered attorney or agent) and stered patent attorneys or no name will be printed.	me of a single firm (having as a member a attorney or agent) and the names of up to add attorneys or agents. If no name is					
	E E	ow, no assignee data will this form is NOT a substi	appear on the patent. If tute for filing an assignme ENCE: (CITY and STATE)	04/14/2006 MBEYENE2 000001 01 FC:1501	013 10622496				
	assignee category or categori		he patent): Individu	a 1504 Logication or other private	e group entity 19 19 GBV ernment				
Ia. The following fee(s) are a second Issue Fee Display Publication Fee (No second Issue Issue Order - # of	mall entity discount permitted	A che	tb. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1073 (enclose an extra copy of this form).						
	(from status indicated above)			(choice direction	to copy of this formy.				
	MALL ENTITY status. See 37			ing SMALL ENTITY status. See 3	· · · · · ·				
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Authorized Signature	Jas		Da	te 4/12/06					
	Thomas J. D'Ami			gistration No. 28,371					
nis form and/or suggestions fox 1450, Alexandria, Virgi llexandria, Virginia 22313-1	for reducing this burden, shown in 22313-1450. DO NOT SE 450.	ald be sent to the Chief In END FEES OR COMPLET	formation Officer, U.S. Pa FED FORMS TO THIS A	nefit by the public which is to file take 12 minutes to complete, include. Any comments on the amount of tent and Trademark Office, U.S. I DDRESS. SEND TO: Commission unless it displays a valid OMB con	Department of Commerce, P.O. ner for Patents, P.O. Box 1450,				

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		Fees pursuan Cotthe Consolitation Appropriations Act, 2005 (H.R. 4818). FEETRANSMITTAL				Complete if Known						
CELTDANI	Application Number 10/622,496-Conf. #49			nf. #4998	3							
	Filing Date	Filing Date July 21, 2003										
For FY	First Named Inventor Ray J. Beffa											
	Examiner Name D. Ton											
Applicant claims small entity	Art Unit 2133											
TOTAL AMOUNT OF PAYMENT	Attomey Docket No. M4065.0038/P038-D											
METHOD OF PAYMENT (check all that apply)												
Check X Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
x Charge fee(s) indica	ated below		Charg	e fee(s) ir	ndicated below, ex	cept for t	he filing fee					
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)												
1. BASIC FILING, SEARCH, AND												
Application Type Fee	FILING FEES Small Entity (\$) Fee (\$)		ARCH FEES Small Entity		NATION FEES Small Entity	Fees Paid (\$)						
	00 150	<u>Fee (\$)</u> 500	Fee (\$) 250	Fee (\$) 200	Fee (\$) 100	rees	raiu (\$)					
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2. EXCESS CLAIM FEES	100	U	· ·	U	O		Small Entity					
Fee Description						Fee (\$)	Fee (\$)					
Each claim over 20 (including Reissues)							25					
Each independent claim over 3 (in				50 200	100							
Multiple dependent claims				360	180							
Total Claims Extra Claims	s Fee (\$)	Fee P	Paid (\$)		Multiple Depende	nt Claims						
- 28 =	_ x =					Fee Paid (\$)						
HP = highest numer of total claims paid	for, if greater than 20.											
Indep. Claims Extra Claims		Fee P	aid (\$)									
-4 = HP = highest numer of independent clair	ms paid for, if greater that	n 3.					;					
3. APPLICATION SIZE FEE		•		-								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sh	eets Number	, , ,	dditional 50 or frac	<u> </u>		Fee	Paid (\$)					
100 = /50 (round up to a whole number) x =												
, ,	4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)											
Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00												
1504 Publication fee for early, voluntary, or normal						300.00						
8001 Printed copy of patent w/o color 15.00												
SUBMITTED BY												
Signature	0		Registration No. (Attorney/Agent)	28,371	Telephone	(202) 82	8-2232					
Name (Print/Type) Thomas J. D'A	mico				Date	April 12	, 2006					